

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990011	BLUE TRAILS WATER ASSOCIATION			C	228	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
				57				

Towns Served: DURHAM, NORTH BRANFORD

### Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Asbestos (1094)		1 routine (RT) per nine years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/13 - 12/31/21		
Total Coliform (3100)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Lead And Copper (PBCU)		5 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
	1/1/19 - 12/31/21	6/1-9/30	
	1/1/22 - 12/31/24	6/1-9/30	
Physical Parameters (PPS)		1 routine (RT) per quarter	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	10/1/18 - 12/31/18		Complete
	1/1/19 - 3/31/19		Complete
	4/1/19 - 6/30/19		
	7/1/19 - 9/30/19		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Net Gross Alpha (4000)		1 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Uranium (4006)		1 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Combined Radium-226/228 (4010)		1 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Nitrate And Nitrite (NOX)		1 routine (RT) per year	
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status

**NOTE:** This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990011	BLUE TRAILS WATER ASSOCIATION			C	228	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
				57				

Towns Served: DURHAM, NORTH BRANFORD

### Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Nitrate And Nitrite (NOX)		1 routine (RT) per year	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete
	1/1/19 - 12/31/19		Complete
	1/1/20 - 12/31/20		
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2012	
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2018	
RESPOND TO SANITARY SURVEY	3/30/2019	3/28/2019
SUBMIT CCR TO THE DEPARTMENT	6/30/2019	
SUBMIT CCR CERTIFICATION FORM	8/9/2019	
CROSS CONNECTION EXEMPTION	3/1/2024	

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		BT01	PUMPHOUSE	A	Y	3	Y	
		BT02	13 BARBARA LANE	A	Y	3	Y	
		BT03	31 GINNY LANE	A	Y	3	Y	
		BT04	33 GINNY LANE	A	Y	3	Y	
		BT05	58 BARBARA LANE	A	Y	3	Y	
		BT06	59 BARBARA LANE	A	Y	3	Y	
		BT07	60 BLUE TRAILS	A	Y	3	Y	
		BT08	62 BARBARA LANE	A	Y	3	Y	
		BT09	73 CAMERA RD	A	Y	3	Y	
		BT10	75 CAMERA RD	A	Y	3	Y	
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990011	BLUE TRAILS WATER ASSOCIATION			C	228	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
				57				

Towns Served: DURHAM, NORTH BRANFORD

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
57739	ATMOSPHERIC TANKS							
57741	PUMP STATION							
57743	PRESSURE TANK							
723	WELL #1	2	WELL #1	A				

### Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: SMALL WATER SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
DEKOEYER, JAMES	CHIEF OPERATOR	SMALL WATER SYSTEM OPERATOR CONDITIONAL	9/30/2020

### Contact Information

Name				Organization		Job Title			
Blue Trails Association, Coporation									
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
Barbara Lane						Durham		CT	06422
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address				
609-748-9186									

Contact Role(s): **Owner**

Name				Organization			Job Title		
Mr. Richard Hintz				Blue Trails Water Association			President		
Mailing Address Line One			Mailing Address Line Two			City		State	Zip Code
62 Barbara Lane						Durham		CT	06422
Business Phone		Extension	Fax	Mobile Phone		Emergency Phone	Email Address		
860-463-8547							rhintz01@comcast.net		

Contact Role(s): **Administrative Contact**

Name				Organization		Job Title		
Mr. Pasquale Young				Berdon, Young & Margolis, Pc		Attorney		
Mailing Address Line One			Mailing Address Line Two			City	State	Zip Code
350 Orange St.			2Nd Floor			New Haven	CT	06511
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address			
203-772-8414		203-492-4444						

Contact Role(s): **Legal Contact**

#### Please note the following:

- The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- If a Collection Period is specified, all water quality samples must be collected during the specified period.
- Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

***If you have any questions, please contact the Drinking Water Section at (860) 509-7333.***

***<http://www.ct.gov/dph/publicdrinkingwater>***

**End of schedule**

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION			C	84	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 REEDS GAP RD				21				

Towns Served: NORTH BRANFORD

### Monitoring Requirements

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

<b>Chlorine Residual (0999)</b>		<b>1 routine (RT) per month</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
<b>Asbestos (1094)</b>		<b>1 routine (RT) per nine years</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/13 - 12/31/21		
<b>Total Coliform (3100)</b>		<b>1 routine (RT) per month</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete
	2/1/19 - 2/28/19		Complete
	3/1/19 - 3/31/19		Complete
	4/1/19 - 4/30/19		
	5/1/19 - 5/31/19		
	6/1/19 - 6/30/19		
	7/1/19 - 7/31/19		
	8/1/19 - 8/31/19		
	9/1/19 - 9/30/19		
	10/1/19 - 10/31/19		
<b>Disinfectant Byproducts - TTHM &amp; HAA5 (DBP)</b>		<b>1 routine (RT) per year</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
BUILDINGS 1 & 2 UNITS (NGCDDBP1)	1/1/18 - 12/31/18	7/1-7/31	Complete
	1/1/19 - 12/31/19	7/1-7/31	
	1/1/20 - 12/31/20	7/1-7/31	
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per three years</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30	Complete
<b>Lead And Copper (PBCU)</b>		<b>5 routine (RT) per six months</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	1/1/19 - 6/30/19		
	7/1/19 - 12/31/19		
<b>Physical Parameters (PPS)</b>		<b>1 routine (RT) per month</b>	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
Select from Inventory of Active Sampling Points	11/1/18 - 11/30/18		Complete
	12/1/18 - 12/31/18		Complete
	1/1/19 - 1/31/19		Complete

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION			C	84	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 REEDS GAP RD				21				

Towns Served: NORTH BRANFORD

### Monitoring Requirements

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Physical Parameters (PPS)		1 routine (RT) per month		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
	2/1/19 - 2/28/19		Complete	
	3/1/19 - 3/31/19		Complete	
	4/1/19 - 4/30/19			
	5/1/19 - 5/31/19			
	6/1/19 - 6/30/19			
	7/1/19 - 7/31/19			
	8/1/19 - 8/31/19			
	9/1/19 - 9/30/19			
	10/1/19 - 10/31/19			

Water Quality Parameters (WQPD)		2 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
Select from Inventory of Active Sampling Points	1/1/16 - 12/31/18	6/1-9/30		

Water System Facility: ENTRY POINT (WSF ID: 00700)

Nitrate (1040)		1 routine (RT) per quarter		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	10/1/18 - 12/31/18		Complete	
	1/1/19 - 3/31/19		Complete	
	4/1/19 - 6/30/19			
	7/1/19 - 9/30/19			

Nitrite (1041)		1 routine (RT) per year		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/18 - 12/31/18		Complete	
	1/1/19 - 12/31/19		Complete	
	1/1/20 - 12/31/20			

Net Gross Alpha (4000)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/17 - 12/31/19			
	1/1/20 - 12/31/22			

Uranium (4006)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/17 - 12/31/19			
	1/1/20 - 12/31/22			

Combined Radium-226/228 (4010)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	
ENTRY POINT (3)	1/1/17 - 12/31/19			
	1/1/20 - 12/31/22			

Inorganic Chemicals (IOCS)		1 routine (RT) per three years		
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status	

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION			C	84	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 REEDS GAP RD				21				

Towns Served: NORTH BRANFORD

### Monitoring Requirements

Water System Facility: ENTRY POINT (WSF ID: 00700)

Inorganic Chemicals (IOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/16 - 12/31/18		Complete
	1/1/19 - 12/31/21		
	1/1/22 - 12/31/24		
Lead And Copper (PBCU)		1 routine (RT) per six months	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	10/1/18 - 3/31/19		Complete
Pesticides, Herbicides and PCBs - Phase II & V (SOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/17 - 12/31/19		
	1/1/20 - 12/31/22		
Organic Chemicals (VOCS)		1 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/18 - 12/31/20		
	1/1/21 - 12/31/23		
Water Quality Parameters - Basic (WQP1)		2 routine (RT) per three years	
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>
ENTRY POINT (3)	1/1/16 - 12/31/18	6/1-9/30	

Water System Facility: WELL #1 (WSF ID: 709)

E. Coli (3014)		1 routine (RT) per month		
<i>Sampling Point (Sampling Point ID)</i>	<i>Monitoring Period</i>	<i>Collection Period</i>	<i>Compliance Status</i>	
WELL #1 (2)	11/1/18 - 11/30/18		Complete	
	12/1/18 - 12/31/18		Complete	
	1/1/19 - 1/31/19		Complete	
	2/1/19 - 2/28/19		Complete	
	3/1/19 - 3/31/19		Complete	
	4/1/19 - 4/30/19			
	5/1/19 - 5/31/19			
	6/1/19 - 6/30/19			
	7/1/19 - 7/31/19			
	8/1/19 - 8/31/19			
	9/1/19 - 9/30/19			
	10/1/19 - 10/31/19			

### Monthly Water System Facility (WSF) Level Monitoring Requirements

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION			C	84	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 REEDS GAP RD				21				

Towns Served: NORTH BRANFORD

### Water System Facility: ENTRY POINT (WSFID: 00700)

Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Chlorine	Entry Point Chlorine Residual Monitoring (CHLR)	Minimum: 0.2 MG/L	Daily
Start Date: 7/1/2003			
Compliance History: Monitoring Period	Operating Limit Compliance Status:	Monitoring Compliance Status:	
11/1/2018 - 11/30/2018		N	
12/1/2018 - 12/31/2018		N	
1/1/2019 - 1/31/2019		N	
2/1/2019 - 2/28/2019		N	
3/1/2019 - 3/31/2019			
4/1/2019 - 4/30/2019			
Analyte	Monitoring Requirement (Summary Type)	Operating Limit	Samples Req/Month
Phosphate (as PO4)	Entry Point Phosphate Monitoring (PHOS)	Minimum: 0.1 MG/L	2
Start Date: 7/1/2003			
Compliance History: Monitoring Period	Operating Limit Compliance Status:	Monitoring Compliance Status:	
11/1/2018 - 11/30/2018		N	
12/1/2018 - 12/31/2018		N	
1/1/2019 - 1/31/2019		N	
2/1/2019 - 2/28/2019		N	
3/1/2019 - 3/31/2019			
4/1/2019 - 4/30/2019			

### Other Compliance Schedules

Compliance Schedule Activity	Due Date	Achieved Date
SUBMIT LEAD CONSUMER NOTICE CERTIFICATE	12/29/2015	
CCTS 1: PWS TO RECOMMEND OCCT	3/15/2019	3/15/2019
SWTS 1: PWS TO RECOMMEND SOWT	3/15/2019	3/15/2019
LEAD PUBLIC EDUCATION CONSUMER DELIVERY	5/1/2019	
LEAD PUBLIC EDUCATION REPORT TO STATE	5/11/2019	
SUBMIT CCR TO THE DEPARTMENT	6/30/2019	
SUBMIT CCR CERTIFICATION FORM	8/9/2019	
SWTS 2: DWS REVIEW & APPROVAL OF SOWT	10/31/2019	
CROSS CONNECTION SURVEY REPORT	3/1/2020	
CCTS 2: DWS REVIEW & APPROVAL OF OCCT	10/31/2020	

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION SYSTEM	A	Y			
		DOWNSTREAM	WITHIN 5 SERVICE CON	A				
		NGCDDBP1	BUILDINGS 1 & 2 UNIT	A				Y
		UPSTREAM	WITHIN 5 SERVICE CON	A				
00700	ENTRY POINT	3	ENTRY POINT	A				

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# Connecticut Department of Public Health Drinking Water Section

## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Classification	Population	Owner Type	Primary Source	
CT0990031	NORTHFORD GLEN CONDOMINIUM ASSOCIATION			C	84	P	GW	
Local Address (where applicable)			Service Connections	Residential	Commercial	Industrial	Combined	Agricultural
246 REEDS GAP RD				21				

Towns Served: NORTH BRANFORD

### Water System Facility and Sampling Point Inventory

Water System Facility ID	Water System Facility	Sampling Point ID	Sampling Point Description	Status	Total Coliform Rule	Lead and Copper Rule Tier	Asbestos	Stage WQP 2 DBPR
333	NORTHFORD GLEN PUMPHOUSE							
51644	ATMOSPHERIC STORAGE TANK							
51646	HYDROPNEUMATIC STORAGE TANK							
51648	BOOSTER PUMPING FACILITIES							
709	WELL #1	2	WELL #1	A				

### Certified Operator Information

Water System Facility: **DISTRIBUTION SYSTEM (WSF ID: 00600)**

Facility Classification: DISTRIBUTION SYSTEM

Operator Name	Operator Type	Certification(s)	Certification Expiration
COSSETTE, EVAN J	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2021
		DISTRIBUTION SYSTEM OPERATOR IN TRAINING	6/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2021

Water System Facility: **NORTHFORD GLEN PUMPHOUSE (WSF ID: 333)**

Facility Classification: CLASS 1 TREATMENT PLANT

Operator Name	Operator Type	Certification(s)	Certification Expiration
COSSETTE, EVAN J	CHIEF OPERATOR	DISTRIBUTION SYSTEM OPERATOR - CLASS II	9/30/2021
		DISTRIBUTION SYSTEM OPERATOR IN TRAINING	6/30/2021
		WATER TREATMENT PLANT OPERATOR - CLASS IV	6/30/2021

### Contact Information

Name		Organization			Job Title		
Northford Glen Condominium Association							
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
Emergency Contact					Emergency Contact	CT	06000
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-484-4869							

Contact Role(s): **Owner**

Name		Organization			Job Title		
Mr. Michael Barulli		Northford Glen Condo Assn.			President		
Mailing Address Line One		Mailing Address Line Two			City	State	Zip Code
246 Reeds Gap Road		Unit 2D			Northford	CT	06472
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address		
203-506-3888				203-589-8396	julieandmak@att.net		

Contact Role(s): **Legal Contact, Owner**

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## Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name	Classification	Population	Owner Type	Primary Source
<b>CT0990031</b>	<b>NORTHFORD GLEN CONDOMINIUM ASSOCIATION</b>	<b>C</b>	<b>84</b>	<b>P</b>	<b>GW</b>
Local Address (where applicable)		Service Connections	Residential	Commercial	Industrial
246 REEDS GAP RD		21			
Towns Served: NORTH BRANFORD					
Name		Organization		Job Title	
<b>Mr. Norman Goodman</b>		Northford Glen Condominium Ass		Property Manager	
Mailing Address Line One		Mailing Address Line Two		City	State
P. O. Box 351				West Haven	CT
Zip Code					
06516					
Business Phone	Extension	Fax	Mobile Phone	Emergency Phone	Email Address
203-933-7960		203-937-8784			NORMG45@AOL.COM
Contact Role(s): <b>Administrative Contact</b>					

**Please note the following:**

1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

***If you have any questions, please contact the Drinking Water Section at (860) 509-7333.***

**<http://www.ct.gov/dph/publicdrinkingwater>**

***End of schedule***

**NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.**